# Work Order (Bid Form)

### WORK ORDER INFORMATION

Work Order Name:

Work Order Type: Weatherization

Audit Name: MADISON

**CLIENT INFORMATION** 

Client Name:

Client ID:

Alt. Client ID: 16016SW-0797

AGENCY INFORMATION

Agency: SWHRA

Address: 1574 White AVE

Henderson, TN

Agency Contact: Oliver, Jerry

Address:

Agency Phone: (731) 989-5111

Fax:

Email Address:

Work Phone: Cell Phone:

Email Address:

Company Name & License Number:	
Contractor's Signature:	

#### COMMENT

NOTICE:

All work performed and material must meet all requirements as stated in the Southeast Weatherization Field Guide. It is the contractor's responsibility to pull all necessary permits required for the town or county where the work is being performed. No change order work shall be done until the change order has been approved and signed. If heater is required no air sealing should be done before heater is installed.

731-571-7721

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Work Order Name

Report Run On: 5/26/2010

## Measures

I	Measure 1 Infiltration Redctn			Components				Inspected		
Comment										
					Estimated			Actual	Liama, Marie Pare Pare Pare Pare Pare Pare Pare Par	
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total	
1	Construction Materials/Hardwar e	Seal vent in closet in living room top and bottom,Seal exhaust vent over cook stove,Seal pipes under kitchen sink	Each	1						
2	Labor	Labor	Hour							
3	Construction Materials/Hardwar e	Seal door to basement,Seal fireplace in living room, Seal return air vent in middle bedroom and door jam	Each	1				Contraction		
4	Labor	Labor	Hour							
5	Construction Materials/Hardwar e	D1 and D2 replace threshold, D3 weather- strip	Each	1						
6	Labor	Labor	Hour							
C	ther Detail									
									Equipment of the second of the	
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Measure Sub Total: Sub T							Sub Total:			
	Field Notes:									

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t Total			
t Total			
t Total			
Inspected			
Actual			
t Total			
Sub Total:			

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Estimated Unit Cost	Total	Qty	Actual Unit Cost	Total		
re Sub Total:	Total			Total		
re Sub Total:			Sub Total:			
re Sub Total:			Sub Total:			
			Sub Total:			
			Sub Total:			
			Sub Total:			
Components			Inspecte			
		Qtv		Total		
			٦ (			
				MALERANIA		
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ire Sub Total.			000.000			
	Estimate	Estimated  Unit Cost Total	Estimated  Unit Cost Total Qty	Estimated Actual  Unit Cost Total Qty Unit Cost		

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Alt. Client ID: 16016SW-0797

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Measure 6 Practice Lead Safe Weatherization			Components			Inspected				
C	omment									
				Estimated			Actual			
#	Material / Labor	Description / Comment	Units	Qty	Unit Cost	Total	Qty	Unit Cost	Total	
1	Health and Safety Items	Equipment	Each	1						
2	Labor	Labor	Hour	1						
2	Other Detail						1;			
L									100	
	Measure Sub Total: Sub Total:									
	Field Notes:									
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		Work Order Grand Total: Grand Total:								

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Client ID:

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